PTO/SB/01 (12-97)

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## **Attorney Docket Number DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date Declaration ☐ Declaration OR Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name required)

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As a below named inventor, I hereby declare that:						
My residence, post office address, and citizenship are as stated below next to my name.						
I believe I am the original.	first and sole inventor (if only	v one name is listed below	n) or an original fi	rst and joint inventor (if plucal		
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
ST SYSTEM AND METHD FOR STOCKTAKING MANAGEMENT						
the specification of which (Title of the Investigat)						
is attached hereto						
OR OR						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (if applicable),						
and was amended on (MINDOS/1117)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.						
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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's						
certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate,						
or of any PCT international application having a filing date before that of the application on which priority is claimed.						
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Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?		
Number(s)			Not Claimed	YES NO		
91137235	Taiwan	Dec/25/02		፼ □		
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	under 35 U.S.C. 119(e) of an		l application(s) lis	ted below.		
Application Number	(s) Filing Date	e (MM/DD/YYYY)				
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			• • •	emental priority data sheet SB/02B attached hereto.		
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[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Additional inventors are being named on the

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## DECLARATION — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: Customer Number 25859 Place Customer OR Registered practitioner(s) name/registration number listed below Number Bar Code I abel here Registration Registration Name Number Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto Direct all correspondence to: 🙀 Customer Number 25859 OR Correspondence address below or Bar Code Label Name Address Address City State ZIP Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if anyl) Family Name or Sumame Ming Fang <u>Tsai</u> Inventor's Signature 09/01/03 Residence: City Tu-chen Country Citizenshidlaiwan Post Office Address 1650 Memorex Drive Post Office Address 95050 Santa Clara U.S.A. City

Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto